(Form IN FORMA PAUPERIS-Rev. 4/20/05, S.D. of Ohio)

## UNITED STATES DISTRICT COURT SOUTHERN DISTRICT OF OHIO

Edward Hilbard

Plaintiff(s)

Case No.

VS.

The Kozer Company

Defendants(s)

APPLICATION/ MOTION TO PROCEED WITHOUT PREPAYMENT OF FEES (IN FORMA PAUPERIS) AND AFFIDAVIT IN SUPPORT THEREOF Instructions: In order for the Court to properly consider your application, you must answer each question below and provide the information requested. No application will be considered until it is fully completed.

		Yes	No A	
A. If you answered "Y	es":			
(1) What is the name	and address of your emplo	yer NIA		
		- IY/A		
(2) How much do you	earn per month?			
			,	
		2 12		
B. If you answered "N	022			
(1) Have you ever bee		Yes X	No	
		were		
employed?	e last year and month you v			
How much did you	earn a month?	300,		
			***************************************	
P. Www.	W W = 2-2			
What Is your marital st	managed transport and			制
		Widowed	_ Divo	rced
A. If you answered "M		V		
(1) Is your spouse em	ployed? Yes	No		
n yes, now much o	loes your spouse earn each	month?		
\$	wa			
I. Do you have any depe If you answered "Yes	ndents? Yes	No X	en should be identified o	aly by their initia
I. Do you have any depe If you answered "Yes relationship to you, as	ndents? Yes " list each dependent's nan nd the amount you contribu	ite to their suppo	rt.	nly by their initia
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I. Do you have any deper If you answered "Yes relationship to you, as Name  Name  Within the past twelve ther form of self-employn	indents? Yes " list each dependent's named the amount you contribute Relationship  (12) months, have you recent, or in the form of ren	eceived any inco	Amount  Amount	
I. Do you have any deper If you answered "Yes relationship to you, as Name  Name  Within the past twelve ther form of self-employnterest or dividends, or an experience of the self-employnterest or dividends.	indents? Yes " list each dependent's named the amount you contribute Relationship  Relationship  (12) months, have you recent, or in the form of recent you cher source?	eceived any inco	me from a business, pricement benefits, annui	ofession or ty payments,
I. Do you have any depet If you answered "Yes relationship to you, at Name  Name  Within the past twelve her form of self-employn terest or dividends, or an A. If you answered "Y	" list each dependent's named the amount you contributed the amount you contributed the amount you contributed the amount you remains a sent, or in the form of remains of the cource?	eceived any inco	me from a business, pricement benefits, annui	ofession or ty payments,
I. Do you have any deper If you answered "Yes relationship to you, at Name  T. Within the past twelve ther form of self-employmerest or dividends, or an A. If you answered "Y source over the twe	indents? Yes	eceived any inco	me from a business, prirement benefits, annui  No  total amount you receiv	ofession or ty payments,
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I. Do you have any deper If you answered "Yes relationship to you, at Name  T. Within the past twelve ther form of self-employmerest or dividends, or an A. If you answered "Y source over the twe	indents? Yes	eceived any inco	me from a business, prirement benefits, annui  No  total amount you receiv	ofession or ty payments, ed from that

Yes No	in a saving-, end-make saving
A. If you answered "Yes", state the con	ibined total amount:
A. If you answered "Yes", describe each  Property  Value	nds, notes, automobiles, or any other valuable property?  n piece of property and state it's value:  Property  Substitute  Yalue
\$ \$ \$ \$ \$	\$ \$ \$ \$
VII. List all your creditors, including ban child support, etc., and the amount your creditor  Creditor  Amount	cs, loan companies, charge accounts, personal loans, rent, utilities, ou pay each month on each bill/obligation:  Owed Creditor Amount Owed  All Cirto betters 23.00
Duke Energy \$82.0 Time Warner calles 102	Allstate Auto \$255.00 Beechmont \$
Town Properties \$650	00 Racket Club 44.00
WIII. State your address and telephone in BINGH. Medowlohd Delingth Ohio	
April 4.2014.	ward. Historian is true and correct.  Signature of Applicant